Class Subclass SSUE CLASSIFICATION					PATENTINUMBER
2		O.I.P.E.		ion ATENT DATE	
APPLICATION NO. CONT/PRIC		SUBCLASS	ART UNIT	EXAMINER	
09/779305 D	709	218	2452 - 2141	Know	Lion of
Gabriel Whyel Method and syst	em for app	ointment/			เหรี
		· · · · · · · · · · · · · · · · · · ·			PTO-2040 12/99

	ISSUIN	G CLASS	IFICATIO	N	
ORIGINAL			CROSS REFERENCE(S)		
CLASS SUBCLASS	S CLASS	SU	BCLASS (ON	E SUBCLASS PER	BLOCK)
NTERNATIONAL CLASSIFICATI	ON				
				Continued on Issue Sli	o Inside File Jacket
		* * * * * * * * * * * * * * * * * * * *			
TERMINAL		DRAWINGS	· · · · · · · · · · · · · · · · · · ·	CLAIM	S ALLOWED
TERMINAL DISCLAIMER	Sheets Drwg.	DRAWINGS Figs. Drwg.	Print Fig.	CLAIM Total Claims	Print Claim for O.G.
DISCLAIMER The term of this patent	Sheets Drwg.		Print Fig.	Total Çlaims	
The term of this patent bsequent to (date)	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Çlaims	Print Claim for O.G.
The term of this patent basequent to (date) a been disclaimed.		Figs. Drwg.		Total Çlaims	Print Claim for O.G.
The term of this patent beequent to (date) is been disclaimed. The term of this patent shall be extend beyond the expiration date		Figs. Drwg.		Total Claims NOTICE OF ALI	Print Claim for O.G.
The term of this patent been disclaimed. The term of this patent shall be extend beyond the expiration date		Figs. Drwg.		Total Claims NOTICE OF ALI	Print Claim for O.G.
The term of this patent been disclaimed. The term of this patent shall be extend beyond the expiration date	(Assistant	Figs. Drwg.		NOTICE OF ALI ISS Amount Due	Print Claim for O.G. OWANCE MAILED UE FEE Date Paid
The term of this patent (date) is been disclaimed. The term of this patent shall of extend beyond the expiration date U.S Patent. No.	(Assistant Primary I	Figs. Drwg.	(Date)	NOTICE OF ALI ISS Amount Due	Print Claim for O.G. OWANCE MAILED UE FEE
The term of this patent absequent to	(Assistant (Assistant (Primary to (Legal Instrument))	Figs. Drwg. Examiner) Examiner) ents Examiner)	(Date) (Date)	NOTICE OF ALI ISS Amount Due ISSUE BA	Print Claim for O.G. OWANCE MAILED UE FEE Date Paid TCH NUMBER

BEST AVAILABLE COPY